PART B - FEE(S) TRANSMITTAL

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(Depositor's name)	egliantoni	Kathryn D	ı
(Signature)	egleati	Kathy De	
(Date)	2009	July 21,	
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APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/692,311 10/23/2003 Raymond E. Counsell 066254-5003US01 8570

TITLE OF INVENTION: BLOOD-POOL CARRIER FOR LIPOPHILIC IMAGING AGENTS

	APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	YES	\$755	\$300	\$0	\$1055	08/03/2009
	EXAM	INER	ART UNIT	CLASS-SUBCLASS]		
	JONES, DAME	RON LEVEST	1618	424-001210			
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.863). Change of correspondence address (or Change of Correspondence Address form FTOSB 122) attached. "Fee Address" indication (or "Fee Address" Indication form FTOSB 47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		eys land Boc era 2	Morgan, Lewis, land Bockius, LLP		
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Board of Regents of the University of Michigan; Ann Arbor, MI

Please check the appropriate assignce category or categories (will not be printed on the patent) : 🔲 Individual 🕱 Corporation or other private group entity 🚨 Government

a. The following fee(s) are submitted:	40. rayment of ree(s): (ricase first reapply any previously paid issue iee snown above)
⅓ Issue Fee	A check is enclosed.
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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